



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591971

REPORT NO. **E467203**

INTERSTATE <input type="checkbox"/>	CITY STREET <input type="checkbox"/>	FIRE RESULTED <input type="checkbox"/>
STATE ROUTE <input checked="" type="checkbox"/>	OTHER <input type="checkbox"/>	STOLEN VEHICLE <input type="checkbox"/>
COUNTY RD <input type="checkbox"/>	PRIVATE WAY <input type="checkbox"/>	HIT & RUN INVOLVED <input type="checkbox"/>

TRIBAL RESERVATION ☐

CASE #	15-02454	
LOCAL AGENCY CODING		
TOTAL # OF UNITS	02	OBJECT STRUCK

DATE OF COLLISION	10	-	01	-	2015	TIME (2400)	1208	COUNTY #	31	MILES	0	N <input type="checkbox"/> E <input type="checkbox"/> S <input type="checkbox"/> W <input type="checkbox"/>	IN OF	<input checked="" type="checkbox"/>	CITY #	0664
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ON (PRIMARY TRAFFIC WAY) INTERSECTION ☐ NON-INTERSECTION ☒

STATE ROUTE **9** BLOCK NO. ☒ **700** MILE POST ☐

DISTANCE **200** **00** MILES ☐ N ☒ E ☐ S ☒ W ☐

OF (REFERENCE OR CROSS STREET) **STATE ROUTE 204**

UNIT 01 MOTOR VEHICLE ☒ PEDAL-CYCLE ☐ DAMAGE THRESHOLD MET YES ☒ NO ☐ PHONE

LAST NAME **BENNETT** FIRST NAME **ALLA** MIDDLE INITIAL

STREET NEW ADDRESS **11719 22ND ST NE**

CITY **LAKE STEVENS** ST **WA** ZIP **982589571**

CDL RESTRICTIONS **B** ENDORSEMENTS

DRIVER'S LICENSE # **BENNEA*214KK** STATE **WA** SEX **F** D.O.B. **05** **12** **1979**

ON DUTY ☐ STATUS AIRBAG **2** RESTR. **9** EJECT **1** HELMET USE INJURY CLASS **1** NATURE OF INJURIES

LICENSE PLATE # **AMV9043** STATE **WA** VIN# **2HGEJ6671TH530635**

TRAILER PLATE # STATE TRAILER PLATE # STATE

VEH. YEAR **1996** MAKE **HOND** MODEL **CIV4D** STYLE **4D** VEHICLE TOWED YES ☐ NO ☒ TOWED BY GOVT. VEHICLE YES ☐ NO ☒

REGISTERED OWNER INFO. OWNED BY DRIVER

LIABILITY INSURANCE IN EFFECT ☒ INSURANCE CO & POLICY # **AMERICAN FAMILY 203220430129 FPFAWA**

VEHICLE LEGALLY STANDING YES ☐ NO ☐ CITATION # CHARGE



UNIT 02 MOTOR VEHICLE ☒ PEDAL-CYCLE ☐ PEDESTRIAN ☐ PROPERTY OWNER ☐ DAMAGE THRESHOLD MET YES ☐ NO ☒ PHONE

LAST NAME **ZARETZKE** FIRST NAME **CARL** MIDDLE INITIAL **R**

STREET NEW ADDRESS **3726 CALLOW RD**

CITY **LAKE STEVENS** ST **WA** ZIP **982580000**

CDL **A** RESTRICTIONS **B, K** ENDORSEMENTS

DRIVER'S LICENSE # **ZARETCR592BZ** STATE **WA** SEX **M** D.O.B. **01** **09** **1941**

ON DUTY ☐ STATUS AIRBAG **2** RESTR. **9** EJECT **1** HELMET USE INJURY CLASS **1** NATURE OF INJURIES

LICENSE PLATE # **A65886U** STATE **WA** VIN# **1GCEK14K4NZ238552**

TRAILER PLATE # STATE TRAILER PLATE # STATE

VEH. YEAR **1992** MAKE **CHEV** MODEL **K1PU** STYLE **PK** VEHICLE TOWED YES ☐ NO ☒ TOWED BY GOVT. VEHICLE YES ☐ NO ☒

REGISTERED OWNER INFO. OWNED BY DRIVER

LIABILITY INSURANCE IN EFFECT ☒ INSURANCE CO & POLICY # **AMERICAN FOREST AFC06115314**

VEHICLE LEGALLY STANDING YES ☐ NO ☐ CITATION # CHARGE



OFFICER'S NAME (PRINT) **R. RUTHERFORD** BADGE OR ID # **0130** AGENCY **WA0311900**



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591972

CORRECTION

REPORT NO. **E467203**

CASE # **15-02454**

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

NAME (LAST, FIRST, MIDDLE INITIAL)		BENNETT SARAH A																
ADDRESS & PHONE #		11719 22ND STREET NE LAKE STEVENS WA 98258																
		SEX	F	D.O.B. MMDDYYYY	12	28	2007											
PASSENGER	<input checked="" type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #	1	SEAT POS.	9	AIRBAG	2	RESTR.	4	EJECT	1	HELMET USE		INJURY CLASS	1	NATURE OF INJURIES
NAME (LAST, FIRST, MIDDLE INITIAL)																		
ADDRESS & PHONE #																		
		SEX		D.O.B. MMDDYYYY														
PASSENGER	<input type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES
NAME (LAST, FIRST, MIDDLE INITIAL)																		
ADDRESS & PHONE #																		
		SEX		D.O.B. MMDDYYYY														
PASSENGER	<input type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES

NARRATIVE

10/01/2015 I was dispatched to a two vehicl collision north of sr204 and sr9. (On sr9). Upon arrival I observed two vehicles in the left turn lane of sr9 approaching the intersection of sr204. Vehicle 1 and vehicle 2 both southbound in the 700blk of sr9. Driver of vehicle 1 said that she turned into the left turn lane as soon as the yellow lane stripes indicated the lanewas open for travel. Vehicle 2 driver said that he attempted to enter left turn lane and vehicle 1 was already occupying the lane. Vehicle 1 entered turn lane properly and vehicle 2 entered some distance south of lane entrance.

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

R. RUTHERFORD

INVESTIGATING OFFICER'S SIGNATURE

UNIT OR DIST. DET

10-01-15 03:23 PM

DATED

PLACE SIGNED

APPROVED BY

SGT. C. VALVICK 0071

DATE

10/2/2015 5:11:47 PM

BADGE OR ID # **0130**

ORI #

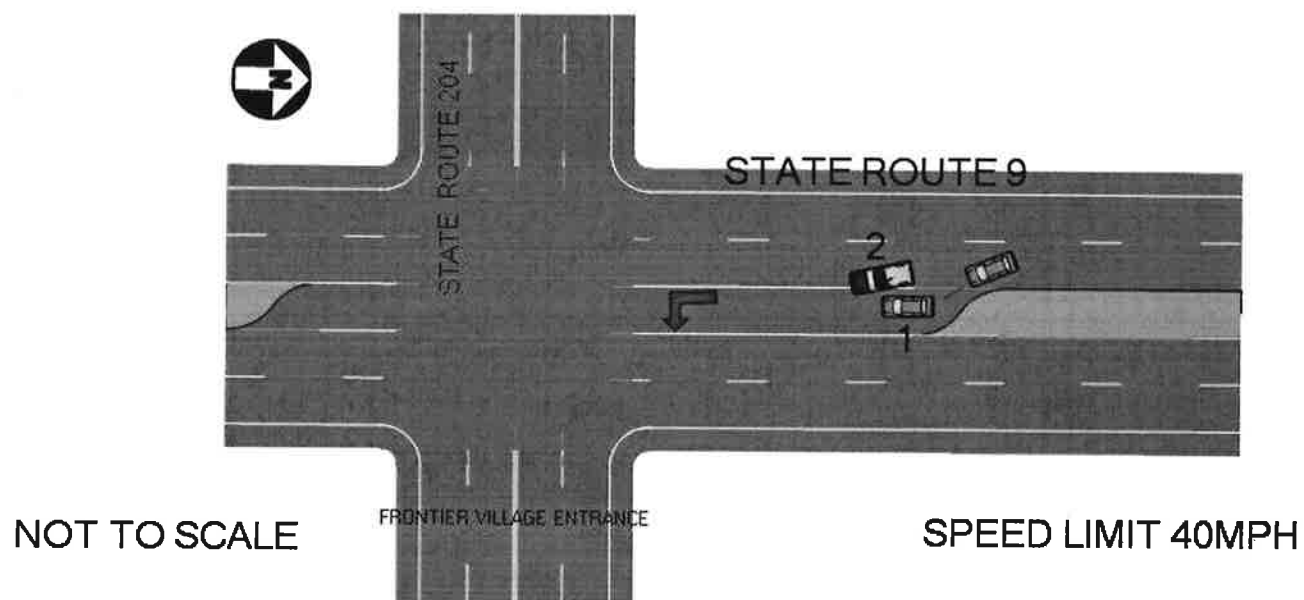
WA0311900

TIME POLICE DISPATCHED

12:09 PM

TIME POLICE ARRIVED

12:11 PM



LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT

CASE NUMBER

1502454

VICTIM / WITNESS

NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE) Bennett, Alla N.	RACE	ETH	SEX	DOB 5/12/79	AGE	HGT	WGT	HAIR	EYES
STREET ADDRESS 1719 22nd St NE		CITY Lake Stevens		STATE WA		ZIP 98258		RES. STATUS		
HOME PHONE (425) 239-2210		CELL PHONE (425) 239-2210		PLACE OF EMPLOYMENT						
WORK PHONE		EMAIL ADDRESS								

I, Ala Bennett, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED. Don't understand

As I turned into left lane ~~to turn~~^{that would} lead me to go to Safeway on Hwy 9. The Red truck that had no blinker on swerved quickly in to the left lane where I was, crossing a solid white line. I was already in left lane he basically ^{meant to} cut me off, or I do not know what he tried to do. My car hit his truck on drivers side like at the angle. The right ^{front} side of my car was destroyed the front ^{right} light were gone, I could not drive, ^{being smashed} My car from the impact could not even move backward, I had to restart the car. The impact was so sudden unexpected it threw my car a little to the opposite side of traffic. There are skid marks on the road right not from that. The driver of Red truck tried to say I did not see his blinker? That is not true accusation. There was no blinker. We did not try to occupy the same lane at the same time ^{more on this page} not. That is not what happened

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE: <u>Ala Bennett</u>	DATE SIGNED 9/11/15	LOCATION SIGNED Lake Stevens
OFFICER/NUMBER: <u>[Signature]</u>	DATE SIGNED 9/11/15	LOCATION SIGNED

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

PAGE ___ OF ___

* my daughter 7 years old was in the car with me in the back right side riding with me. in the car. AS I have been terribly shaken up I called 911, The operator told me that someone has already reported the accident. AS I looked outside my window, I saw a man across the street, waiting for his ^{city} bus, yelling and saying "I already call in, officer is on his way!" Because of all the chaos, I was not able to get the witnesses name, he let on the City Bus.

I was asked if I was in pain or if my daughter was in pain. I have told them I am in shock, I am not bleeding!

I can move, So they did not take me or my daughter to Providence. + I told them that I do not have a ride back home, from Providence. Right? not, I am experiencing pain in the back (lower) right hip and leg. also, my jaw and head hurt a lot. I ^(and my daughter) will be getting checked out today for that. as soon as I am ^{done filling this report.} The police officer said he would take pictures of my car and the red truck (other car) and file a report, and that my insurance would get that.

9/1/15 (2)
Alla Bennett

LAKE STEVENS POLICE EVIDENCE UNIT		Primary Officer/Badge Number <i>Patrol #130</i>		Case Number: <i>15-02454</i>	
Type of Crime: Felony / <u>Misdemeanor</u> (Circle)		Type of Case: <i>COUSIN</i>		Date/Time:	
Action Number: 3 - EVIDENCE; 5 - FOUND; 10 - SAFEKEEPING		*Evi will be held until court dispo or when the Statute of Limitations has expired *Found and Sfgk will be held for 60 days or 60 days past owner notification			

Case #

Item # Action # <i>3</i>	Item <i>Photo CD</i>	Brand Name			Storage Location	Disposition
	Brand/Model/Caliber (Further Description)					
	Serial #	Where Found	Weight of Narcotic			
Owner's Name Address City State Zip Phone #					Barcode goes here	
Owner Signature/Other remarks /additional information/ special instructions						
Item # Action #	Item	Brand Name			Storage Location	Disposition
	Brand/Model/Caliber (Further Description)					
	Serial #	Where Found	Weight of Narcotic			
Owner's Name Address City State Zip Phone #					Barcode goes here	
Owner Signature/Other remarks /additional information/ special instructions						
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	Brand/Model/Caliber (Further Description)					
	Serial #	Where Found	Weight of Narcotic			
Owner's Name Address City State Zip Phone #					Barcode goes here	
Owner Signature/Other remarks /additional information/ special instructions						
Item # Action #	Item	Brand Name			Storage Location	Disposition
	Brand/Model/Caliber (Further Description)					
	Serial #	Where Found	Weight of Narcotic			
Owner's Name Address City State Zip Phone #					Barcode goes here	
Owner Signature/Other remarks /additional information/ special instructions						
Item # Action #	Item	Brand Name			Storage Location	Disposition
	Brand/Model/Caliber (Further Description)					
	Serial #	Where Found	Weight of Narcotic			
Owner's Name Address City State Zip Phone #					Barcode goes here	
Owner Signature/Other remarks /additional information/ special instructions						

Evidence Control Use Only:

Received by Evidence:	NCIC/WACIC <input checked="" type="checkbox"/>	Date:	CAD/RMS Checked	ROUTING: _____
Name: _____ # _____	NCIC/WACIC +	Date:	Owner Letter Sent:	White: Property Room
Date: _____ Time: _____	NCIC/WACIC -	Date:	Owner Letter Sent:	Yellow: Case File













